



SAN LUIS OBISPO COUNTY
DEPARTMENT OF PUBLIC WORKS

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FEE WAIVER REQUEST

(Per Fee Ordinance 3235, Schedule B, page 73, footnotes 5 and 6)

Property Owner: _____

Address: _____

Phone: _____ **Email:** _____

Applicant: _____

Address: _____

Phone: _____ **Email:** _____

Applicant is a volunteer, community and nonprofit organization? ☐ **Yes** ☐ **No**

Case Number(s): _____

Assessor Parcel Number(s): _____

Total Fees Due \$ _____ **Fees waived on previous permits \$** _____

Community Benefit Justification: (check all that apply)

- ☐ The proposed project will be available for use by the public at-large and is likely that the project will be used or will benefit more than the residents of the immediate vicinity.
- ☐ The project will be of obvious public benefit as evidenced by:
- ☐ The project meets a need previously identified or recognized by the Board of Supervisors.
 - ☐ The project replaces another facility that previously provided public benefit.
 - ☐ The project provides a facility not presently available in the community.
 - ☐ The project has generated substantial, obvious community support.
 - ☐ The project would reduce other County costs or increase other County revenues.
 - ☐ The project has other evidence of public benefit. *(Explain on a separate sheet.)*
- ☐ The fees to be waived will not exceed a total of \$3,000.

Disaster Relief Justification:

- ☐ The project reconstructs a legally constructed home or other structure destroyed by a natural or manmade disaster, where the Board of Supervisors adopts a resolution declaring such a disaster.

Applicant Signature: _____ **Date:** _____

Recommend Fee Waiver by
Development Services Engineer: _____ **Date:** _____

Fees waived by
Public Works Director: _____ **Date:** _____

Amount waived: _____